

Public Health Service

Food and Drug Administration College Park, MD 20740

0767 5 NOV -7 P1:58

SEP 2 2 2005

Ms. Kristin Foster Administrator New Chapter, Inc. 22 High Street P.O. Box 1947 Brattleboro, Vermont 05302

Dear Ms. Foster:

This is in response to your letters of September 6, 2005 to the Food and Drug Administration (FDA) pursuant to 21 U.S.C. 343(r)(6) (section 403(r)(6) of the Federal Food, Drug, and Cosmetic Act (the Act)). Your submissions state that New Chapter, Inc. is making the following claims, among others, for the following products:

Probiotic Immune Support ™

"Enhances immune resistance during cold and flu season;"

Supercritical Sinus and Respiratory

"[P]romote comfort during the cold and flu season."

Headache Relief ™

"[R]elief from headaches and other painful conditions..."

21 U.S.C. 343(r)(6) makes clear that a statement included in labeling under the authority of that section may not claim to diagnose, mitigate, treat, cure, or prevent a specific disease or class of diseases. The statements that you are making for these products (including the product name "Headache Relief") suggest that they are intended to treat, prevent, or mitigate diseases, namely the common cold and influenza and diseases for which pain is a characteristic sign or symptom. These claims do not meet the requirements of 21 U.S.C. 343(r)(6). These claims suggest that these products are intended for use as drugs within the meaning of 21 U.S.C. 321(g)(1)(B), and that they are subject to regulation under the drug provisions of the Act. If you intend to make claims of this nature, you should contact FDA's Center for Drug Evaluation and Research (CDER), Office of Compliance, HFD-310, Montrose Metro II, 11919 Rockville Pike, Rockville, Maryland 20852.

Page 2 - Ms. Margaret E. Kilroy

Please contact us if we may be of further assistance.

Sincerely yours,

Susan J. Walker, M.D.

Director

Division of Dietary Supplement Programs
Office of Nutritional Products, Labeling
and Dietary Supplements
Center for Food Safety
and Applied Nutrition

Copies:

FDA, Center for Drug Evaluation and Research, Office of Compliance, HFD-310 FDA, Office of the Associate Commissioner for Regulatory Affairs, Office of Enforcement, HFC-200

FDA, New England District Office, Office of Compliance, HFR-NE240



This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Probiotic Immune Support™.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Enhances immune resistance during cold and flu season

(Statement 2): 10 beneficial non-centrifuged probiotics cultured in immune-boosting fruits, vegetables, and herbs

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement	Identity of Dietary Ingredient(s) or		
<u>Number</u>	Supplement(s) that is the subject of the Statement		
1.	American Elderberry, Spinach, Parsley, Okra, Oregano, Cumin, Ginger,		
	Arabinogalactan, Milk, Nutritional Yeast, and Bacteria (L. casei,		
	L.Plantarum, L.salivarius, L.acidophilus, L.rhamnosus, S.thermophilus,		
	B.bifidum, B.infantis, B.longum, B.breve)		
2.	American Elderberry, Spinach, Parsley, Okra, Oregano, Cumin, Ginger, Arabinogalactan, Milk, Nutritional Yeast, and Bacteria (<i>L. casei</i> ,		
	L.Plantarum, L.salivarius, L.acidophilus, L.rhamnosus, S.thermophilus, B.bifidum, B.infantis, B.longum, B.breve)		

The following identifies the brand name of each supplement for which a statement is made:

Statement

<u>Number</u>	Brand Name	Label or Labeling?
1.	Probiotic Immune Support™	Label and Labeling
2.	Probiotic Immune Support™	Label and Labeling

I, Kristin Foster, am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading.

Date Signed: Sept 6, 200 5 By: Houston Faster, DA administration [Name]

05-6062

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This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Probiotic Immune Support™.

The text of each structure-function statement for which notification is now being given is:

(Statement 3): Probiotic Immune Support

(Statement 4): Rather than centrifuging or removing the culturing media as in other products, New Chapter formulates its culturing media to deliver phytonutrient-rich herbs and foods designed for maximizing the probiotics' life supportive effects.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Identity of Dietary Ingredient(s) or Statement Supplement(s) that is the subject of the Statement Number

- 3. American Elderberry, Spinach, Parsley, Okra, Oregano, Cumin, Ginger, Arabinogalactan, Milk, Nutritional Yeast, and Bacteria (L. casei, L. Plantarum, L.salivarius, L.acidophilus, L.rhamnosus, S.thermophilus, B.bifidum, B.infantis, B.longum, B.breve)
- 4. American Elderberry, Spinach, Parsley, Okra, Oregano, Cumin, Ginger, Arabinogalactan, Milk, Nutritional Yeast, and Bacteria (L. casei, L.Plantarum, L.salivarius, L.acidophilus, L.rhamnosus, S.thermophilus, B.bifidum, B.infantis, B.longum, B.breve)

The following identifies the brand name of each supplement for which a statement is made:

Statement

Number	Brand Name	Label or Labeling?
3.	Probiotic Immune Support™	Label and Labeling
4.	Probiotic Immune Support™	Label

I, Kristin Foster, am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading. Date Signed: Sept 6, 200 5 By: Brister Faster, DA alministrator

[Name]

[Title]

This notification is being filed on behalf of <u>New Chapter</u>, <u>Inc.</u> which is the <u>manufacturer</u> of the product(s) which bear the statements identified in this notification. Its business address is:

<u>22 High St. PO Box 1947, Brattleboro, VT 05302.</u> This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is **Probiotic Immune** Support™.

The text of each structure-function statement for which notification is now being given is:

(Statement 5): Probiotics with a Purpose™ Probiotic Immune Support™ provides ten valuable strains of friendly flora, selected and balanced to achieve anti-aging and free radical scavenging capabilities.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Identity of Dietary Ingredient(s) or Number Supplement(s) that is the subject of the Statement

5. American Elderberry, Spinach, Parsley, Okra, Oregano, Cumin, Ginger, Arabinogalactan, Milk, Nutritional Yeast, and Bacteria (*L. casei, L.Plantarum, L.salivarius, L.acidophilus, L.rhamnosus, S.thermophilus, B.bifidum, B.infantis, B.longum, B.breve*)

The following identifies the brand name of each supplement for which a statement is made:

statement is made:		
Statement		
<u>Number</u>	Brand Name	<u>Label or Labeling?</u>

5. Probiotic Immune Support™ Label

I, Kristin Foster, am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading.

Date Signed: Sept 6, 2005 By: Mallow John Manuel France.

[Name] [Title]



This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Supercritical Sinus and Respiratory.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Supercritical powder for greater comfort and fast recovery.

(Statement 2): Optimizes wellness through dozens of confirmed immunoactive botanical pathways.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Identity of Dietary Ingredient(s) or Supplement(s) that is the subject of the Statement
Garlic, Oregano, Echinacea, Elderberry, Goldenseal, Andrographis,
Green Tea, Astragalus, Melissa, Myrrh, Wintergreen, Ginger Eucalyptus, Peppermint, Meadowsweet and Purple Willow.
Garlic, Oregano, Echinacea, Elderberry, Goldenseal, Andrographis,
Green Tea, Astragalus, Melissa, Myrrh, Wintergreen, Ginger Eucalyptus, Peppermint, Meadowsweet and Purple Willow.

The following identifies the brand name of each supplement for which a statement is made:

	ement <u>nber</u> <u>Brand Name</u>	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each Date Signed Luguel 30, 200 5 By: Wester Scales, Quality Courses (Name) [Name] [Title] 16067 structure-function statement is truthful and not misleading.

This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Supercritical Sinus and Respiratory.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): From India and Ayurvedic medicine comes Andrographis paniculata, which we extract to provide Potency Assured™ levels of andrographolides to modulate immune functioning.

(Statement 2): From China we benefit from astragalus, an adaptogen that promotes immune strength and enhances natural killer cell capabilities.

(Statement 3): From Japan we treasure the immune balancing powder of green tea.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Number	Identity of Dietary Ingredient(s) or Supplement(s) that is the subject of the Statement
1.	Andrographis paniculata,
2.	Astragalus
3.	Green Tea

The following identifies the brand name of each supplement for which a statement is made:

	tement nber Brand Name	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

1. Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading. Date Signed Mysel 2005 By: Kristin Soler, Of Administrator [Name]

[Title]

This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is **Supercritical Sinus and** Respiratory.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): The world offers comfort during times of challenge from herbs rich with salicin, such as wintergreen, purple willow, and meadowsweet.

(Statement 2): And our dear friend ginger, which we grown on our organic farm in Costa Rica, invigorates us and brings its herbal cousins to life.

(Statement 3): One of nature's most important immune defenders; containing, according to the USDA, at least 36 supportive constituents including the antioxidant compound caracrol.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Identity of Dietary Ingredient(s) or Supplement(s) that is the subject of the Statement Number 1. Wintergreen, purple willow and meadowsweet. 2. Ginger 3. Oregano

The following identifies the brand name of each supplement for which a statement is made:

Nur Nur	ement nber Brand Name	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

I, Kristin Foster am authorized to certify this Notification of	on behalf of <i>New</i>
Chapter, Inc. I certify that the information presented and contain	
complete and accurate, and that New Chapter, Inc. has substant	
structure-function statement is truthful and not misleading.	
Date Signed Lugus 30, 2005 By: Grante Botter, L	Justificanurance_
[Name]	1/1/1-1-1
[Title]	administrator

This notification is being filed on behalf of <u>New Chapter, Inc.</u> which is the <u>manufacturer</u> of the product(s) which bear the statements identified in this notification. Its business address is:

<u>22 High St. PO Box 1947, Brattleboro, VT 05302.</u> This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is **Supercritical Sinus and Respiratory.**

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Fresh supercritical extract delivers the broadest spectrum of nature's most effective immune-supportive organosulphur molecules.

(Statement 2): Combination of Potency Assured™ angustifolia and purpurea extracts synergize to optimally modulate and enhance healthy immune response.

(Statement 3): Israeli research has demonstrated significant potential of this fruit extract's components to support healthy immune function.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement	Identity of Dietary Ingredient(s) or		
<u>Number</u>	Supplement(s) that is the subject of the Statemen		
1.	Garlic		
2 .	Echinacea		
3.	Elderberry		

The following identifies the brand name of each supplement for which a statement is made:

	tement nber Brand Name	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading.

Date Signed Www. 2005 By: Www. Date Signed West Signed By: Www. Date Signed

Date Signed: Wywt30, 2005 By: Wywt. Dott [Name]

This notification is being filed on behalf of <u>New Chapter, Inc.</u> which is the <u>manufacturer</u> of the product(s) which bear the statements identified in this notification. Its business address is:

<u>22 High St. PO Box 1947, Brattleboro, VT 05302.</u> This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is **Supercritical Sinus and Respiratory.**

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Long history of use in traditional medicine for its treasured immunesupportive benefits.

(Statement 2): Asian herb extract prized for its ability to modulate immune function with its unique Potency Assured™ compounds called andrographolides.

(Statement 3): A rich source of safe and effective compounds, like polyphenols, valued for countering unfriendly flora and balancing the immune system.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement	Identity of Dietary Ingredient(s) or	
<u>Number</u>	Supplement(s) that is the subject of the Statement	
1.	Goldenseal	
2 .	Andrographis	
3 .	Green tea	
- -	Andrographis	

The following identifies the brand name of each supplement for which a statement is made:

	tement nber Brand Name	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New	
<u>Chapter, Inc.</u> I certify that the information presented and contained in this Notification is	in
complete and accurate, and that <u>New Chapter, Inc.</u> has substantiation that each	15
structure-function statement is truthful and not misleading.	/
Date Signed Man & 2005 By: Lorenten Fortes Of Mammest	ER

[Name] [Title]

This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Supercritical Sinus and Respiratory.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Revered Chinese herb valued in traditional medicine for immune support and in modern research for enhancing natural killer cell activities.

(Statement 2): Natural sources of salicylic acid and other important phytocompounds to promote comfort during the cold and flu season/

(Statement 3): Rich in antioxidant flavonoid compounds to reduce damage caused by free radical stress.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Identity of Dietary Ingredient(s) or Number Supplement(s) that is the subject of the Statement

- 1. Astragalus
- 2. Wintergreen, meadowsweet and purple willow
- 3 Melissa

The following identifies the brand name of each supplement for which a statement is made:

	tement nber Brand Name	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading Faster, QAadministrator

1910/30, 200<u>5</u> By: 1910tin [Name]

This notification is being filed on behalf of <u>New Chapter, Inc.</u> which is the <u>manufacturer</u> of the product(s) which bear the statements identified in this notification. Its business address is:

<u>22 High St. PO Box 1947, Brattleboro, VT 05302.</u> This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is <u>Supercritical Sinus and Respiratory</u>.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Long revered for its immune supportive effects to the chest and throat, recent British research shows at least 12 phytocompounds with immune-defensive benefits.

(Statement 2): Time honored remedy to improve respiration and support normal immune functions.

(Statement 3): Time tested remedy for soothing the digestive system and countering unfriendly flora.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Number	Identity of Dietary Ingredient(s) or Supplement(s) that is the subject of the Statement
1.	Ginger
2.	Eucalyptus
3.	Peppermint

The following identifies the brand name of each supplement for which a statement is made:

	tement <u>nber</u> <u>Brand Name</u>	Label or Labeling?
1.	Supercritical Sinus and Respiratory	Label and Labeling
2.	Supercritical Sinus and Respiratory	Label and Labeling
3.	Supercritical Sinus and Respiratory	Label and Labeling

I, <u>Kristin Foster</u> am authorized to certify this Notification on behalf of <u>New</u> <u>Chapter, Inc.</u> I certify that the information presented and contained in this Notification is
complete and accurate, and that New Chapter, Inc. has substantiation that each
structure-function statement is truthful and not misleading.
Date Signed Luguet 30, 2005 By: Bruten Jaster, QA administrator
[Name]
[Title]

This notification is being filed on behalf of <u>New Chapter, Inc.</u> which is the <u>manufacturer</u> of the product(s) which bear the statements identified in this notification. Its business address is:

<u>22 High St. PO Box 1947, Brattleboro, VT 05302.</u> This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is <u>Headache Relief™</u>.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Used for thousands of years for relief from headaches and other painful conditions, recent research shows that ginger possesses numerous constituents that can modulate the formation of inflammatory prostaglandins.

(Statement 2): One of the most sacred therapeutic herbs in Celtic tradition and recommended in ancient Ayuvedic medicine for pain and stomach complains, meadowsweet is now recognized as a rich source of inflammation modulating salicylic acid.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement	Identity of Dietary Ingredient(s) or	
<u>Number</u>	Supplement(s) that is the subject of the Stateme	
1.	Ginger	
2	Meadowsweet	

The following identifies the brand name of each supplement for which a statement is made:

Statement <u>Number</u>	Brand Name	Label or Labeling?
1.	Headache Relief™	Label and Labeling
2.	Headache Relief™	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading.

Date Signed Lyus 26, 200 By: Krustus Faster, UR administrator [Name]

[Title]

This notification is being filed on behalf of New Chapter, Inc. which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is:

22 High St. PO Box 1947, Brattleboro, VT 05302. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R §101.93. The dietary supplement product on whose label or labeling the statements appear is Headache Relief™.

The text of each structure-function statement for which notification is now being given is:

(Statement 1): Used traditionally by Native Americans to relieve strained muscles and promote a healthy inflammation response, wintergreen is also recognized as one of nature's richest sources of inflammation modulating salicylic acid.

(Statement 2): Noted by the Greek physician Hippocrates as a valuable herb for pain relief, the herb is now recommended in European phamacopoeias for its gentle inflammation modulating benefits.

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Statement Number	Identity of Dietary Ingredient(s) or Supplement(s) that is the subject of the Stateme	
1.	Wintergreen	
2.	Purple Willow	

The following identifies the brand name of each supplement for which a statement is made:

Statement <u>Number</u>	Brand Name	<u>Label or Labeling?</u>
1.	Headache Relief™	Label and Labeling
2.	Headache Relief™	Label and Labeling

I, Kristin Foster am authorized to certify this Notification on behalf of New Chapter, Inc. I certify that the information presented and contained in this Notification is complete and accurate, and that New Chapter, Inc. has substantiation that each structure-function statement is truthful and not misleading. ter, OA administrator

Date Signed Mys 26, 200 5 By: Bruston [Name]

Title